

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44235

FILED
Feb 20, 2012
Secretary of State

Entity Name: ATLANTIC CLASSICAL ORCHESTRA, INC.

Current Principal Place of Business:

415 AVENUE A
SUITE 301
FORT PIERCE, FL 34950

New Principal Place of Business:

415 AVENUE A
SUITE 305
FORT PIERCE, FL 34950

Current Mailing Address:

415 AVENUE A
SUITE 301
FORT PIERCE, FL 34950

New Mailing Address:

415 AVENUE A
SUITE 305
FORT PIERCE, FL 34950

FEI Number: 65-0307858

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LAPORTA, MICHAEL F
1004 ISLA VERDE SQUARE
VERO BEACH, FL 32963 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CHAI
Name: RAPPAPORT, JEROME L
Address: 9 RIVER CREST COURT
City-St-Zip: STUART, FL 34996

Title: VC
Name: LAHEY, EDWARD JR.
Address: 287 ISLAND CREEK DRIVE
City-St-Zip: VERO BEACH, FL 32963

Title: VP
Name: BLAGBROUGH, RICHARD
Address: 1322 SE BREWSTER PLACE
City-St-Zip: STUART, FL 34997

Title: VP
Name: WAXLAX, HEIDI L
Address: 950 REEF ROAD
City-St-Zip: VERO BEACH, FL 32963

Title: T
Name: BECKERT, JOHN MR.
Address: 9120 SPRING TIME DRIVE
City-St-Zip: VERO BEACH, FL 32963

Title: SEC
Name: SHOAF, MARY L
Address: 705 RIOMAR DRIVE
City-St-Zip: VERO BEACH, FL 32963

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL F LAPORTA

PRES

02/20/2012

Electronic Signature of Signing Officer or Director

Date